

| YES | NO | 10. Questionnaire (Place an "X" in the proper column) |
|-----|----|---|
| X | | a. Is this the official copy of the series? If not, where is it? |
| X | | b. Does the series contain confidential information requiring security handling? If yes, cite law or regulation. See item 11 below. Some report information is confidential. (5 years to OPB personnel only) |
| | X | c. Is this a vital record? |
| X | | d. Does this series have historical or long term research value? |
| | X | e. When one or two documents in the file make it necessary to keep the entire file for a long period, could these documents be scheduled separately? |
| | X | f. Is the information contained in this series ever published? If yes, attach copy. |
| | X | g. Is the information contained in this series ever analyzed and/or recorded in a summarized report? If yes, attach copy. |
| X | | h. Is there a duplication of this series in your office, or in another office or agency? If yes, where? Affected agency has a copy. |
| | X | i. Is this series (or a major portion of it) regularly microfilmed? |
| | X | j. Does the record series result in a computer printout? |

11. Retention Requirements

The following requires the series to be kept:

- | | | | |
|--------------------------|--------------|-----------------------------------|--------------|
| a. State Law | _____ years. | d. Audit period | _____ years. |
| b. Statute of limitation | _____ years. | e. Administrative need | _____ years. |
| c. Federal law | _____ years. | f. Federal retention instructions | _____ years. |

Attach copy or excerpt of laws or regulations. Explain administrative need.

Closed as above under Georgia Code 40-810c. May be opened with approval of agency head.

12. Approved Disposition Instructions

This agency recommends that the file series be cut off at the end of each:

☐ Calendar Year; ☒ Fiscal Year; ☐ Other _____ then,

- ☐ Hold in the current files area _____ month(s) 1 year(s); then
- ☐ Transfer to local holding area; hold _____ year(s); then
- ☐ Transfer to State Records Center; hold _____ year(s); then
- ☐ Destroy.
- ☒ Transfer to State Archives for permanent retention.
- ☐ Other (Specify)

These instructions apply to all prior and future accumulations of the series.

| Agency Head/Designee (Signature) | Date | Records Management Officer (Signature) | Date |
|---|----------------|--|----------------|
| <i>Jim Braselton (4/81)</i> | <i>3/24/81</i> | <i>Jim Braselton (4/81)</i> | <i>3/24/81</i> |
| | | State Records Committee (Signature) | Date |
| Recommendations in paragraph 12 are approved. (If disapproved, attach letter of explanation.) <i>73-198-A</i> | | State Auditor/Designee | <i>5-19-81</i> |
| | | Secretary of State/Designee | <i>5-18-81</i> |
| | | Attorney General/Designee | <i>5-4-81</i> |